

EXHIBIT 1

DECLARATION OF JASON T. WEBER

My full legal name is Jason Thomas Weber. I am of sound mind, over 18 years of age. I make this *Declaration* based upon my personal knowledge and state as follows:

1. I am counsel of record for Defendants US Energy Solutions, Inc. (“UES”) and Serghei Busmachiou (“Busmachiou”) (collectively, “Defendants”) in Cause No. DC-19-18533, in the 14th Judicial District Court, Dallas County, Texas (the “Lawsuit”).
2. I have been practicing law in Texas since 2010 and have never been the subject of any professional disciplinary action or judicial reprimand.
3. In connection with the defense of this Lawsuit I served (or caused to be served) a request for a certified copy of Plaintiff Dynamis Energy, LLC d/b/a United Energy Services’s (“Plaintiff”) corporate records maintained by the Office of the Secretary of State of Texas. Attached hereto as Exhibit 1-A is a true and correct copy of the certified records that were produced by the Texas Secretary of State in response to my firm’s request for records related to Plaintiff.

Pursuant to 28 U.S.C. § 1746, I declare under penalty of perjury under the laws of the United State of America that the foregoing is true and correct.

Executed on this 13th day of January, 2020.

Jason T. Weber
Jason T. Weber

DocuSign Envelope ID: 701D006E-60C4-413E-9926-00BD29A15FB5
Corporations Section
P.O.Box 13697
Austin, Texas 78711-3697



EXHIBIT 1-A Ruth R. Hughes
Secretary of State

Office of the Secretary of State

The undersigned, as Secretary of State of Texas, does hereby certify that the attached is a true and correct copy of each document on file in this office as described below:

Dynamis Energy, LLC
Filing Number: 801520512

Certificate of Formation	December 14, 2011
Certificate of Merger	April 26, 2012
Certificate of Assumed Business Name	June 04, 2012
Public Information Report (PIR)	December 31, 2012
Public Information Report (PIR)	December 31, 2013
Public Information Report (PIR)	December 31, 2014
Public Information Report (PIR)	December 31, 2015
Change of Registered Agent/Office	June 06, 2016
Public Information Report (PIR)	December 31, 2016
Public Information Report (PIR)	December 31, 2017
Public Information Report (PIR)	December 31, 2018
Certificate of Amendment	February 19, 2019
Change of Registered Agent/Office	November 13, 2019
Public Information Report (PIR)	December 31, 2019

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on January 09, 2020.

Come visit us on the internet at <https://www.sos.texas.gov/>

Phone: (512) 463-5555
Prepared by: SOS-WEB

Fax: (512) 463-5709
TID: 10266

Dial: 7-1-1 for Relay Services
Document: 936059100003

DocuSign Envelope ID: 701D006E-60C4-413E-9926-00BD29A15FB5
Corporations Section
P.O.Box 13697
Austin, Texas 78711-3697



Ruth R. Hughes
Secretary of State

Office of the Secretary of State



A handwritten signature in black ink, appearing to read "Ruth R. Hughes".

Ruth R. Hughes
Secretary of State

Come visit us on the internet at <https://www.sos.texas.gov/>


Phone: (512) 463-5555
Prepared by: SOS-WEB

Fax: (512) 463-5709
TID: 10266

Dial: 7-1-1 for Relay Services
Document: 936059100003

Def. App. 003

DocuSign Envelope ID: 701D006E-60C4-413E-9926-00BD29A15FB5

Form 401 Secretary of State P.O. Box 13697 Austin, TX 78711-3697 FAX: 512/463-5709 Filing Fee: See Instructions	 Statement of Change of Registered Office/Agent	Filed in the Office of the Secretary of State of Texas Filing #: 801520512 11/13/2019 Document #: 926729210002 Image Generated Electronically for Web Filing
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Entity Information
The name of the entity is :
<u>Dynamis Energy, LLC</u>
The file number issued to the entity by the secretary of state is: <u>801520512</u>
The registered agent and registered office of the entity as currently shown on the records of the secretary of state are:
<u>Incorp Services, Inc.</u>
<u>815 Brazos, Suite 500, Austin, TX, USA 78701-0000</u>
Change to Registered Agent/Registered Office
The following changes are made to the registered agent and/or office information of the named entity:
Registered Agent Change
<input checked="" type="checkbox"/> A. The new registered agent is an organization by the name of:
<u>Registered Agents Inc.</u>
OR
<input type="checkbox"/> B. The new registered agent is an individual resident of the state whose name is:
Registered Office Change
<input checked="" type="checkbox"/> C. The business address of the registered agent and the registered office address is changed to:
<u>5900 Balcones Drive Suite 100, Austin, TX, USA 78731-0000</u>
The street address of the registered office as stated in this instrument is the same as the registered agent's business address.
Consent of Registered Agent
<input type="checkbox"/> A. A copy of the consent of registered agent is attached.
<input checked="" type="checkbox"/> B. The consent of the registered agent is maintained by the entity.
Statement of Approval
The change specified in this statement has been authorized by the entity in the manner required by the BOC or in the manner required by the law governing the filing entity, as applicable.
Effectiveness of Filing
<input checked="" type="checkbox"/> A. This document becomes effective when the document is filed by the secretary of state.
<input type="checkbox"/> B. This document becomes effective at a later date, which is not more than ninety (90) days from the date of its filing by the secretary of state. The delayed effective date is:
Execution
The undersigned signs this document subject to the penalties imposed by law for the submission of a materially false or fraudulent instrument.
Date: <u>November 13, 2019</u>
<u>Justin Bishop</u>

DocuSign Envelope ID: 701D006E-60C4-413E-9926-00BD29A15FB5

Signature of authorized person(s)

FILING OFFICE COPY

Texas Franchise Tax Public Information Report


 Comptroller of Public Accounts
 FORM 05-102
 (Rev. 9-11/30)

 To be filed by Corporations, Limited Liability Companies (LLC) and Financial Institutions
 This report MUST be signed and filed to satisfy franchise tax requirements

■ TCode 13196 Franchise

■ Taxpayer number

■ Report year

You have certain rights under Chapter 552 and 559, Government Code, to review, request, and correct information we have on file about you. Contact us at (800) 252-1381 or (512) 463-4600.

3 2 0 4 6 0 2 2 1 5 1

2 0 1 9

Taxpayer name DYNAMIS ENERGY, LLC				Secretary of State (SOS) file number or Comptroller file number 0801520512	
Mailing address 8763 SW 27TH LN STE 101					
City GAINESVILLE	State FL	ZIP Code 32608	Plus 4		

● Blacken circle if there are currently no changes from previous year; if no information is displayed, complete the applicable information in Sections A, B and C.

Principal office 8763 SW 27TH LN STE 101, GAINESVILLE, FL 32608
Principal place of business 8763 SW 27TH LN STE 101, GAINESVILLE, FL 32608

Please sign below!

Officer, director and manager information is reported as of the date a Public Information Report is completed. The information is updated annually as part of the franchise tax report. There is no requirement or procedure for supplementing the information as officers, directors, or managers change throughout the year.



SECTION A Name, title and mailing address of each officer, director or manager.

3204602215119

Name JUSTIN BISHOP	Title DIRECTOR	Director <input checked="" type="radio"/> YES	Term expiration m m d d y y
Mailing address 8763 SW 27TH LANE, SUITE 101	City GAINESVILLE	State FL	ZIP Code 32608
Name ROBERT MICHAEL SCOTT II	Title DIRECTOR	Director <input checked="" type="radio"/> YES	Term expiration m m d d y y
Mailing address 124 ROBSART ROAD	City KENILWORTH	State IL	ZIP Code 60043
Name JUSTIN BISHOP	Title VICE PRESI	Director <input type="radio"/> YES	Term expiration m m d d y y
Mailing address 8763 SW 27TH LANE, SUITE 101	City GAINESVILLE	State FL	ZIP Code 32608

SECTION B Enter the information required for each corporation or LLC, if any, in which this entity owns an interest of 10 percent or more.

Name of owned (subsidiary) corporation or limited liability company	State of formation	Texas SOS file number, if any	Percentage of ownership
Name of owned (subsidiary) corporation or limited liability company	State of formation	Texas SOS file number, if any	Percentage of ownership

SECTION C Enter the information required for each corporation or LLC, if any, that owns an interest of 10 percent or more in this entity or limited liability company.

Name of owned (parent) corporation or limited liability company	State of formation	Texas SOS file number, if any	Percentage of ownership
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Registered agent and registered office currently on file. (see instructions if you need to make changes)

 Agent: **INCORP SERVICES, INC.**

● Blacken circle if you need forms to change the registered agent or registered office information.

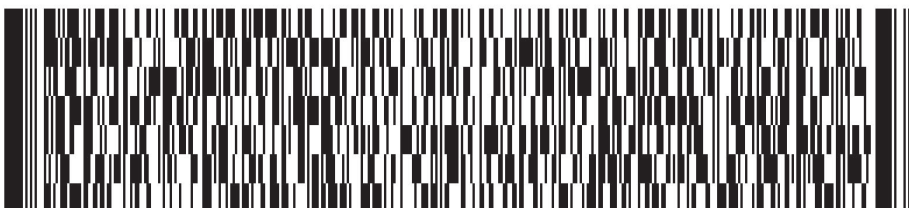
Office: 815 BRAZOS, SUITE 500	City AUSTIN	State TX	ZIP Code 78701
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The above information is required by Section 171.203 of the Tax Code for each corporation or limited liability company that files a Texas Franchise Tax Report. Use additional sheets for Sections A, B, and C, if necessary. The information will be available for public inspection.

I declare that the information in this document and any attachments is true and correct to the best of my knowledge and belief, as of the date below, and that a copy of this report has been mailed to each person named in this report who is an officer, director or manager and who is not currently employed by this, or a related, corporation or limited liability company.

sign here Doris B Cloud	Title Electronic	Date 05-10-2019	Area code and phone number (281) 292 - 4858
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Texas Comptroller Official Use Only



VE/DE	<input type="radio"/>	PIR IND	<input type="radio"/>
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Comptroller of Public Accounts
FORM 05-102
(Rev. 9-11/30)**Texas Franchise Tax Public Information Report**

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This report MUST be signed and filed to satisfy franchise tax requirements

Tcode 13196 Franchise

Taxpayer number

3 2 0 4 6 0 2 2 1 5 1

Report year

2 0 1 9

You have certain rights under Chapter 552 and 559, Government Code, to review, request, and correct information we have on file about you. Contact us at (800) 252-1381 or (512) 463-4600.

Taxpayer name

DYNAMIS ENERGY, LLC

Mailing address

8763 SW 27TH LN STE 101Secretary of State (SOS) file number or
Comptroller file number

City

GAINESVILLE

State

FL

ZIP Code

32608

Plus 4

0801520512

Blacken circle if there are currently no changes from previous year; if no information is displayed, complete the applicable information in Sections A, B and C.

Principal office

8763 SW 27TH LN STE 101, GAINESVILLE, FL 32608

Principal place of business

8763 SW 27TH LN STE 101, GAINESVILLE, FL 32608**Please sign below!**

Officer, director and manager information is reported as of the date a Public Information Report is completed. The information is updated annually as part of the franchise tax report. There is no requirement or procedure for supplementing the information as officers, directors, or managers change throughout the year.

**SECTION A** Name, title and mailing address of each officer, director or manager.

3204602215119

Name ROBERT MICHAEL SCOTT II	Title CHIEF EXEC	Director <input type="radio"/> YES	Term expiration m m d d y y
Mailing address 124 ROBSART ROAD	City KENILWORTH	State IL	ZIP Code 60043
Name	Title	Director <input type="radio"/> YES	Term expiration m m d d y y
Mailing address	City	State	ZIP Code
Name	Title	Director <input type="radio"/> YES	Term expiration m m d d y y
Mailing address	City	State	ZIP Code

SECTION B Enter the information required for each corporation or LLC, if any, in which this entity owns an interest of 10 percent or more.

Name of owned (subsidiary) corporation or limited liability company	State of formation	Texas SOS file number, if any	Percentage of ownership
Name of owned (subsidiary) corporation or limited liability company	State of formation	Texas SOS file number, if any	Percentage of ownership

SECTION C Enter the information required for each corporation or LLC, if any, that owns an interest of 10 percent or more in this entity or limited liability company.

Name of owned (parent) corporation or limited liability company	State of formation	Texas SOS file number, if any	Percentage of ownership
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Registered agent and registered office currently on file. (see instructions if you need to make changes)

Agent: **INCORP SERVICES, INC.**

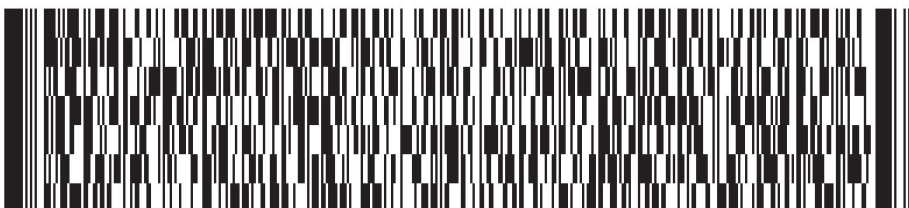
Blacken circle if you need forms to change the registered agent or registered office information.

Office: 815 BRAZOS, SUITE 500	City: AUSTIN	State: TX	ZIP Code: 78701
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The above information is required by Section 171.203 of the Tax Code for each corporation or limited liability company that files a Texas Franchise Tax Report. Use additional sheets for Sections A, B, and C, if necessary. The information will be available for public inspection.

I declare that the information in this document and any attachments is true and correct to the best of my knowledge and belief, as of the date below, and that a copy of this report has been mailed to each person named in this report who is an officer, director or manager and who is not currently employed by this, or a related, corporation or limited liability company.

sign here Doris B Cloud	Title Electronic	Date 05-10-2019	Area code and phone number (281) 292 - 4858
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Texas Comptroller Official Use Only

VE/DE	<input type="radio"/>	PIR IND	<input type="radio"/>
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Form 424**(Revised 05/11)**

Submit in duplicate to:

Secretary of State

P.O. Box 13697

Austin, TX 78711-3697

512 463-5555

FAX: 512/463-5709

Filing Fee: See instructions**Certificate of Amendment**

This space reserved for office use.

FILED
In the Office of the
Secretary of State of Texas

FEB 19 2019**Corporations Section****Entity Information**

The name of the filing entity is:

Dynamis Energy LLC

State the name of the entity as currently shown in the records of the secretary of state. If the amendment changes the name of the entity, state the old name and not the new name.

The filing entity is a: (Select the appropriate entity type below.)

☐ For-profit Corporation☐ Professional Corporation☐ Nonprofit Corporation☐ Professional Limited Liability Company☐ Cooperative Association☐ Professional Association☒ Limited Liability Company☐ Limited PartnershipThe file number issued to the filing entity by the secretary of state is: 801520512The date of formation of the entity is: 12/14/2011**Amendments****1. Amended Name**

(If the purpose of the certificate of amendment is to change the name of the entity, use the following statement)

The amendment changes the certificate of formation to change the article or provision that names the filing entity. The article or provision is amended to read as follows:

The name of the filing entity is: (state the new name of the entity below)

The name of the entity must contain an organizational designation or accepted abbreviation of such term, as applicable.

2. Amended Registered Agent/Registered Office

The amendment changes the certificate of formation to change the article or provision stating the name of the registered agent and the registered office address of the filing entity. The article or provision is amended to read as follows:

RECEIVED
SECRETARY OF STATE

FEB 19 2019**Registrations Unit**

Registered Agent

(Complete either A or B, but not both. Also complete C.)

☐ A. The registered agent is an organization (cannot be entity named above) by the name of:

OR

☐ B. The registered agent is an individual resident of the state whose name is:*First Name**M.I.**Last Name**Suffix*

The person executing this instrument affirms that the person designated as the new registered agent has consented to serve as registered agent.

C. The business address of the registered agent and the registered office address is:

*Street Address (No P.O. Box)**City*

TX

*State Zip Code***3. Other Added, Altered, or Deleted Provisions**

Other changes or additions to the certificate of formation may be made in the space provided below. If the space provided is insufficient, incorporate the additional text by providing an attachment to this form. Please read the instructions to this form for further information on format.

Text Area (The attached addendum, if any, is incorporated herein by reference.)

☐ **Add** each of the following provisions to the certificate of formation. The identification or reference of the added provision and the full text are as follows:

☒ **Alter** each of the following provisions of the certificate of formation. The identification or reference of the altered provision and the full text of the provision as amended are as follows:

Article 7

Members Robert Michael Scott and Justin Bishop are the only members and owners

Remove members W. Daniel Cook, Robert Case, and Robert Brown

☐ **Delete** each of the provisions identified below from the certificate of formation.

Statement of Approval

The amendments to the certificate of formation have been approved in the manner required by the Texas Business Organizations Code and by the governing documents of the entity.

Effectiveness of Filing (Select either A, B, or C.)

- A. ☒ This document becomes effective when the document is filed by the secretary of state.
- B. ☐ This document becomes effective at a later date, which is not more than ninety (90) days from the date of signing. The delayed effective date is: _____
- C. ☐ This document takes effect upon the occurrence of a future event or fact, other than the passage of time. The 90th day after the date of signing is: _____

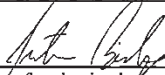
The following event or fact will cause the document to take effect in the manner described below:

Execution

The undersigned signs this document subject to the penalties imposed by law for the submission of a materially false or fraudulent instrument and certifies under penalty of perjury that the undersigned is authorized under the provisions of law governing the entity to execute the filing instrument.

☐ 01/11/2019

☐ Dynamis Energy, LLC



Signature of authorized person

Justin Bishop

Printed or typed name of authorized person (see instructions)

Texas Franchise Tax Public Information Report

Comptroller of Public Accounts
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(Rev. 9-11/30)To be filed by Corporations, Limited Liability Companies (LLC) and Financial Institutions
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Tax Code 13196 Franchise

Taxpayer number

3 2 0 4 6 0 2 2 1 5 1

Report year

2 0 1 8

You have certain rights under Chapter 552 and 559, Government Code, to review, request, and correct information we have on file about you. Contact us at (800) 252-1381 or (512) 463-4600.

Taxpayer name

DYNAMIS ENERGY, LLC

Mailing address

8763 SW 27TH LN STE 101

Secretary of State (SOS) file number or
Comptroller file number

City

GAINESVILLE

State

FL

ZIP Code

32608

Plus 4

0801520512

Blacken circle if there are currently no changes from previous year; if no information is displayed, complete the applicable information in Sections A, B and C.

Principal office

8763 SW 27TH LN STE 101, GAINESVILLE, FL 32608

Principal place of business

8763 SW 27TH LN STE 101, GAINESVILLE, FL 32608

Please sign below!

Officer, director and manager information is reported as of the date a Public Information Report is completed. The information is updated annually as part of the franchise tax report. There is no requirement or procedure for supplementing the information as officers, directors, or managers change throughout the year.



3204602215118

SECTION A Name, title and mailing address of each officer, director or manager.

Name JUSTIN BISHOP	Title DIRECTOR	Director <input checked="" type="radio"/> YES	Term expiration m m d d y y [][][][][][]
Mailing address 8763 SW 27TH LANE, SUITE 101	City GAINESVILLE	State FL	ZIP Code 32608
Name JUSTIN BISHOP	Title VICE PRESI	Director <input type="radio"/> YES	Term expiration m m d d y y [][][][][][]
Mailing address 8763 SW 27TH LANE, SUITE 101	City GAINESVILLE	State FL	ZIP Code 32608
Name ROBERT MICHAEL SCOTT II	Title DIRECTOR	Director <input checked="" type="radio"/> YES	Term expiration m m d d y y [][][][][][]
Mailing address 124 ROBSART ROAD	City KENILWORTH	State IL	ZIP Code 60043

SECTION B Enter the information required for each corporation or LLC, if any, in which this entity owns an interest of 10 percent or more.

Name of owned (subsidiary) corporation or limited liability company	State of formation	Texas SOS file number, if any	Percentage of ownership
Name of owned (subsidiary) corporation or limited liability company	State of formation	Texas SOS file number, if any	Percentage of ownership

SECTION C Enter the information required for each corporation or LLC, if any, that owns an interest of 10 percent or more in this entity or limited liability company.

Name of owned (parent) corporation or limited liability company	State of formation	Texas SOS file number, if any	Percentage of ownership
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Registered agent and registered office currently on file. (see instructions if you need to make changes)

Agent: INCORP SERVICES, INC.

Blacken circle if you need forms to change the registered agent or registered office information.

Office: 815 BRAZOS, SUITE 500	City AUSTIN	State TX	ZIP Code 78701
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The above information is required by Section 171.203 of the Tax Code for each corporation or limited liability company that files a Texas Franchise Tax Report. Use additional sheets for Sections A, B, and C, if necessary. The information will be available for public inspection.

I declare that the information in this document and any attachments is true and correct to the best of my knowledge and belief, as of the date below, and that a copy of this report has been mailed to each person named in this report who is an officer, director or manager and who is not currently employed by this, or a related, corporation or limited liability company.

sign here Doris B Cloud	Title Electronic	Date 05-10-2018	Area code and phone number (281) 292 - 4858
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Texas Comptroller Official Use Only



VE/DE	<input type="radio"/>	PIR IND	<input type="radio"/>
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■ Report year

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3 2 0 4 6 0 2 2 1 5 1

2 0 1 8

Taxpayer name
DYNAMIS ENERGY, LLCMailing address
8763 SW 27TH LN STE 101City
GAINESVILLEState
FLZIP Code
32608

Plus 4

Secretary of State (SOS) file number or
Comptroller file number**0801520512**

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Principal office
8763 SW 27TH LN STE 101, GAINESVILLE, FL 32608Principal place of business
8763 SW 27TH LN STE 101, GAINESVILLE, FL 32608**Please sign below!**

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**SECTION A** Name, title and mailing address of each officer, director or manager.

3204602215118

Name DANIEL COOK	Title PRESIDENT	Director <input type="radio"/> YES	Term expiration m m d d y y <input type="text"/>
Mailing address 66 KINGSCOTE WAY	City THE WOODLANDS	State TX	ZIP Code 77382
Name ROBERT MICHAEL SCOTT II	Title CHIEF EXEC	Director <input type="radio"/> YES	Term expiration m m d d y y <input type="text"/>
Mailing address 124 ROBSART ROAD	City KENILWORTH	State IL	ZIP Code 60043
Name DANIEL COOK	Title DIRECTOR	Director <input checked="" type="radio"/> YES	Term expiration m m d d y y <input type="text"/>
Mailing address 66 KINGSCOTE WAY	City THE WOODLANDS	State TX	ZIP Code 77382

SECTION B Enter the information required for each corporation or LLC, if any, in which this entity owns an interest of 10 percent or more.

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● Blacken circle if you need forms to change the registered agent or registered office information.

Office: **815 BRAZOS, SUITE 500** City **AUSTIN** State **TX** ZIP Code **78701**

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sign here **Doris B Cloud** Title **Electronic** Date **05-10-2018** Area code and phone number **(281) 292 - 4858****Texas Comptroller Official Use Only**

VE/DE	<input type="radio"/>	PIR IND	<input type="radio"/>
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Texas Franchise Tax Public Information Report

Comptroller of Public Accounts
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Name ROBERT MICHAEL SCOTT II	Title DIRECTOR	Director <input checked="" type="radio"/> YES	Term expiration m m d d y y [][][][][][]
Mailing address 124 ROBSART ROAD	City KENILWORTH	State IL	ZIP Code 60043
Name JUSTIN BISHOP	Title DIRECTOR	Director <input checked="" type="radio"/> YES	Term expiration m m d d y y [][][][][][]
Mailing address 8763 SW 27TH LANE, SUITE 101	City GAINESVILLE	State FL - FLORIDA	ZIP Code 32608
Name ROBERT MICHAEL SCOTT II	Title CHIEF EXEC	Director <input type="radio"/> YES	Term expiration m m d d y y [][][][][][]
Mailing address 124 ROBSART ROAD	City KENILWORTH	State IL	ZIP Code 60043

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Registered agent and registered office currently on file. (see instructions if you need to make changes)

Agent: **INCORP SERVICES, INC.**

☐ Blacken circle if you need forms to change the registered agent or registered office information.

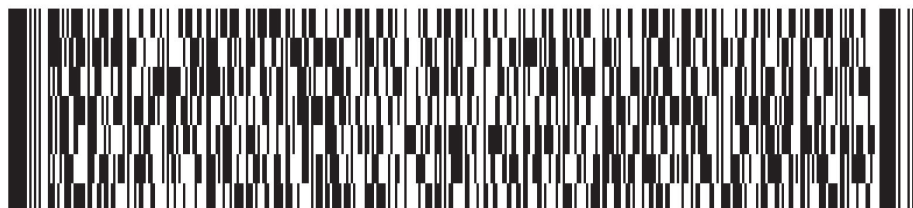
Office: 815 BRAZOS, SUITE 500	City AUSTIN	State TX	ZIP Code 78701
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The above information is required by Section 171.203 of the Tax Code for each corporation or limited liability company that files a Texas Franchise Tax Report. Use additional sheets for Sections A, B, and C, if necessary. The information will be available for public inspection.

I declare that the information in this document and any attachments is true and correct to the best of my knowledge and belief, as of the date below, and that a copy of this report has been mailed to each person named in this report who is an officer, director or manager and who is not currently employed by this, or a related, corporation or limited liability company.

sign here Doris B Cloud	Title Electronic	Date 08-21-2017	Area code and phone number (281) 292 - 4858
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Texas Comptroller Official Use Only



VE/DE <input type="radio"/>	PIR IND <input type="radio"/>
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DocuSign Envelope ID: 701D006E-60C4-413E-9926-00BD29A15FB5

Texas Franchise Tax Public Information ReportComptroller of Public Accounts
FORM 05-102
(Rev. 9-11/30)To be filed by Corporations, Limited Liability Companies (LLC) and Financial Institutions
This report MUST be signed and filed to satisfy franchise tax requirements

Tcode 13196 Franchise

Taxpayer number

3 2 0 4 6 0 2 2 1 5 1

Report year

2 0 1 7

You have certain rights under Chapter 552 and 559, Government Code, to review, request, and correct information we have on file about you. Contact us at (800) 252-1381 or (512) 463-4600.

Taxpayer name

DYNAMIS ENERGY, LLC

Mailing address

8763 SW 27TH LN STE 101Secretary of State (SOS) file number or
Comptroller file number

City

GAINESVILLE

State

FL

ZIP Code

32608

Plus 4

0801520512☐ Blacken circle if there are currently no changes from previous year; if no information is displayed, complete the applicable information in Sections A, B and C.

Principal office

Principal place of business

Please sign below!

Officer, director and manager information is reported as of the date a Public Information Report is completed. The information is updated annually as part of the franchise tax report. There is no requirement or procedure for supplementing the information as officers, directors, or managers change throughout the year.

**SECTION A** Name, title and mailing address of each officer, director or manager.

3204602215117

Name JUSTIN BISHOP	Title VICE PRESI	Director <input type="radio"/> YES	Term expiration m m d d y y
Mailing address 8763 SW 27TH LANE, SUITE 101	City GAINESVILLE	State FL - FLORIDA	ZIP Code 32608
Name DANIEL COOK	Title DIRECTOR	Director <input checked="" type="radio"/> YES	Term expiration m m d d y y
Mailing address 66 KINGSCOTE WAY	City THE WOODLANDS	State TX	ZIP Code 77382
Name DANIEL COOK	Title PRESIDENT	Director <input type="radio"/> YES	Term expiration m m d d y y
Mailing address 66 KINGSCOTE WAY	City THE WOODLANDS	State TX	ZIP Code 77382

SECTION B Enter the information required for each corporation or LLC, if any, in which this entity owns an interest of 10 percent or more.

Name of owned (subsidiary) corporation or limited liability company	State of formation	Texas SOS file number, if any	Percentage of ownership
Name of owned (subsidiary) corporation or limited liability company	State of formation	Texas SOS file number, if any	Percentage of ownership

SECTION C Enter the information required for each corporation or LLC, if any, that owns an interest of 10 percent or more in this entity or limited liability company.

Name of owned (parent) corporation or limited liability company	State of formation	Texas SOS file number, if any	Percentage of ownership
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Registered agent and registered office currently on file. (see instructions if you need to make changes)

Agent: **INCorp SERVICES, INC.**☐ Blacken circle if you need forms to change the registered agent or registered office information.

Office: 815 BRAZOS, SUITE 500	City AUSTIN	State TX	ZIP Code 78701
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I declare that the information in this document and any attachments is true and correct to the best of my knowledge and belief, as of the date below, and that a copy of this report has been mailed to each person named in this report who is an officer, director or manager and who is not currently employed by this, or a related, corporation or limited liability company.

sign here Doris B Cloud	Title Electronic	Date 08-21-2017	Area code and phone number (281) 292 - 4858
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Texas Comptroller Official Use Only

VE/DE	<input type="radio"/>	PIR IND	<input type="radio"/>
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DocuSign Envelope ID: 701D006E-60C4-413E-9926-00BD29A15FB5

Filing Number: 801520512

05-102
(Rev. 9-15/33)**Texas Franchise Tax Public Information Report**To be filed by Corporations, Limited Liability Companies (LLC), Limited Partnerships (LP),
Professional Associations (PA) and Financial Institutions

■ Taxcode 13196 Franchise

■ Taxpayer number

■ Report year

3 2 0 4 6 0 2 2 1 5 1

2 0 1 6

You have certain rights under Chapter 552 and 559,
Government Code, to review, request and correct information
we have on file about you. Contact us at 1-800-252-1381.

Taxpayer name DYNAMIS ENERGY LLC		<input type="checkbox"/> Blacken circle if the mailing address has changed.	
Mailing address 2620 TECHNOLOGY FOREST BLVD		Secretary of State (SOS) file number or Comptroller file number 0801520512	
City THE WOODLANDS	State TX	ZIP code plus 4 77381	

☐ Blacken circle if there are currently no changes from previous year; if no information is displayed, complete the applicable information in Sections A, B and C.

Principal office 2620 TECHNOLOGY FOREST BLVD, THE WOODLANDS, TX, 77381
Principal place of business 2620 TECHNOLOGY FOREST BLVD, THE WOODLANDS, TX, 77381

You must report officer, director, member, general partner and manager information as of the date you complete this report.

Please sign below!**This report must be signed to satisfy franchise tax requirements.**

1000000000015

SECTION A Name, title and mailing address of each officer, director, member, general partner or manager.

Name DANIEL COOK	Title PRESIDENT	Director <input checked="" type="radio"/> YES	Term expiration m m d d y y <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Mailing address 66 KINGSCOTE WAY	City THE WOODLANDS	State TX	ZIP Code 77382
Name ROBERT MICHAEL SCOTT II	Title CEO	Director <input checked="" type="radio"/> YES	Term expiration m m d d y y <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Mailing address 2702 COLE AVENUE 222	City DALLAS	State TX	ZIP Code 75204
Name JUSTIN BISHOP	Title VP	Director <input checked="" type="radio"/> YES	Term expiration m m d d y y <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Mailing address 7860 SOUTHWEST 82ND DRIVE	City GAINESVILLE	State FL	ZIP Code 32608

SECTION B Enter information for each corporation, LLC, LP, PA or financial institution, if any, in which this entity owns an interest of 10 percent or more.

Name of owned (subsidiary) corporation, LLC, LP, PA or financial institution	State of formation	Texas SOS file number, if any	Percentage of ownership
Name of owned (subsidiary) corporation, LLC, LP, PA or financial institution	State of formation	Texas SOS file number, if any	Percentage of ownership

SECTION C Enter information for each corporation, LLC, LP, PA or financial institution, if any, that owns an interest of 10 percent or more in this entity.

Name of owned (parent) corporation, LLC, LP, PA or financial institution	State of formation	Texas SOS file number, if any	Percentage of ownership
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Registered agent and registered office currently on file (see instructions if you need to make changes)Agent: **DANIEL COOK**You must make a filing with the Secretary of State to change registered
agent, registered office or general partner information.

Office: 2620 TECHNOLOGY FOREST BLVD	City THE WOODLANDS	State TX	ZIP Code 77381
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The information on this form is required by Section 171.203 of the Tax Code for each corporation, LLC, LP, PA or financial institution that files a Texas Franchise Tax Report. Use additional sheets for Sections A, B and C, if necessary. The information will be available for public inspection.

I declare that the information in this document and any attachments is true and correct to the best of my knowledge and belief, as of the date below, and that a copy of this report has been mailed to each person named in this report who is an officer, director, member, general partner or manager and who is not currently employed by this or a related corporation, LLC, LP, PA or financial institution.

sign here Rob Brown	Title Member	Date 09/15/2016	Area code and phone number (281) 681 - 2381
----------------------------	---------------------	------------------------	---

Texas Comptroller Official Use Only

VE/DE <input type="radio"/>	PIR IND <input type="radio"/>
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DocuSign Envelope ID: 701D006E-60C4-413E-9926-00BD29A15FB5

05-102
(Rev. 9-15/33)**Texas Franchise Tax Public Information Report**To be filed by Corporations, Limited Liability Companies (LLC), Limited Partnerships (LP),
Professional Associations (PA) and Financial Institutions

■ Taxcode 13196 Franchise

■ Taxpayer number

■ Report year

3 2 0 4 6 0 2 2 1 5 1

2 0 1 6

You have certain rights under Chapter 552 and 559,
Government Code, to review, request and correct information
we have on file about you. Contact us at 1-800-252-1381.

Taxpayer name DYNAMIS ENERGY LLC		<input type="checkbox"/> Blacken circle if the mailing address has changed.	
Mailing address 2620 TECHNOLOGY FOREST BLVD		Secretary of State (SOS) file number or Comptroller file number 0801520512	
City THE WOODLANDS	State TX	ZIP code plus 4 77381	

☐ Blacken circle if there are currently no changes from previous year; if no information is displayed, complete the applicable information in Sections A, B and C.

Principal office 2620 TECHNOLOGY FOREST BLVD, THE WOODLANDS, TX, 77381
Principal place of business 2620 TECHNOLOGY FOREST BLVD, THE WOODLANDS, TX, 77381

You must report officer, director, member, general partner and manager information as of the date you complete this report.

Please sign below!**This report must be signed to satisfy franchise tax requirements.**

1000000000015

SECTION A Name, title and mailing address of each officer, director, member, general partner or manager.

Name ROBERT CASE	Title	Director <input checked="" type="radio"/> YES	Term expiration m m d d y y
Mailing address 15 COURTLAND GREEN	City THE WOODLANDS	State TX	ZIP Code 77382
Name	Title	Director <input type="radio"/> YES	Term expiration m m d d y y
Mailing address	City	State	ZIP Code
Name	Title	Director <input type="radio"/> YES	Term expiration m m d d y y
Mailing address	City	State	ZIP Code

SECTION B Enter information for each corporation, LLC, LP, PA or financial institution, if any, in which this entity owns an interest of 10 percent or more.

Name of owned (subsidiary) corporation, LLC, LP, PA or financial institution	State of formation	Texas SOS file number, if any	Percentage of ownership
Name of owned (subsidiary) corporation, LLC, LP, PA or financial institution	State of formation	Texas SOS file number, if any	Percentage of ownership

SECTION C Enter information for each corporation, LLC, LP, PA or financial institution, if any, that owns an interest of 10 percent or more in this entity.

Name of owned (parent) corporation, LLC, LP, PA or financial institution	State of formation	Texas SOS file number, if any	Percentage of ownership
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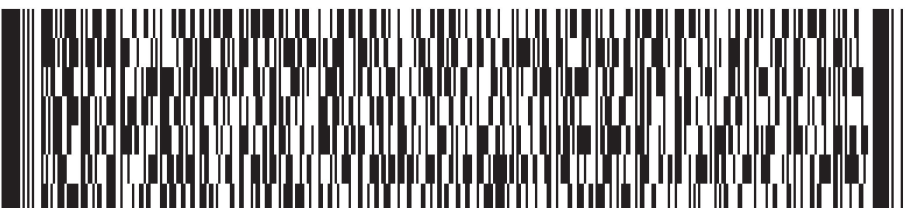
Registered agent and registered office currently on file (see instructions if you need to make changes)Agent: **DANIEL COOK**You must make a filing with the Secretary of State to change registered
agent, registered office or general partner information.

Office: 2620 TECHNOLOGY FOREST BLVD	City THE WOODLANDS	State TX	ZIP Code 77381
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The information on this form is required by Section 171.203 of the Tax Code for each corporation, LLC, LP, PA or financial institution that files a Texas Franchise Tax Report. Use additional sheets for Sections A, B and C, if necessary. The information will be available for public inspection.


I declare that the information in this document and any attachments is true and correct to the best of my knowledge and belief, as of the date below, and that a copy of this report has been mailed to each person named in this report who is an officer, director, member, general partner or manager and who is not currently employed by this or a related corporation, LLC, LP, PA or financial institution.

sign here Rob Brown	Title Member	Date 09/15/2016	Area code and phone number (281) 681 - 2381
----------------------------	---------------------	------------------------	---

Texas Comptroller Official Use Only

VE/DE <input type="radio"/>	PIR IND <input type="radio"/>
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Form 401 (Revised 05/11) Submit in duplicate to: Secretary of State P.O. Box 13697 Austin, TX 78711-3697 512 463-5555 FAX: 512/463-5709 Filing Fee: See instructions	<div style="text-align: right;">This space reserved for office use.</div> <div style="text-align: center;">  Statement of Change of Registered Office/Agent </div> <div style="text-align: right;"> FILED In the Office of the Secretary of State of Texas JUN 06 2016 Corporations Section </div>
---	--

Entity Information

1. The name of the entity is:

Dynamis Energy, LLC*State the name of the entity as currently shown in the records of the secretary of state.*2. The file number issued to the filing entity by the secretary of state is: 0801520512

3. The name of the registered agent as currently shown on the records of the secretary of state is:

DANIEL COOK*Registered Agent Name*

The address of the registered office as currently shown on the records of the secretary of state is:

<u>2620 North Crescent Ridge Drive</u>	<u>The Woodlands</u>	<u>TX</u>	<u>77381</u>
<i>Street Address</i>	<i>City</i>	<i>State</i>	<i>Zip Code</i>

Change to Registered Agent/Registered Office

4. The certificate of formation or registration is modified to change the registered agent and/or office of the filing entity as follows:

Registered Agent Change

(Complete either A or B, but not both. Also complete C if the address has changed.)

☒ A. The new registered agent is an organization (cannot be entity named above) by the name of:InCorp Services, Inc.

OR

☐ B. The new registered agent is an individual resident of the state whose name is:

<u>First Name</u>	<u>M.I.</u>	<u>Last Name</u>	<u>Suffix</u>
Registered Office Change			

☒ C. The business address of the registered agent and the registered office address is changed to:

<u>815 Brazos St., Ste. 500</u>	<u>Austin</u>	<u>TX</u>	<u>78701</u>
<i>Street Address (No P.O. Box)</i>	<i>City</i>	<i>State</i>	<i>Zip Code</i>

The street address of the registered office as stated in this instrument is the same as the registered agent's business address.

Form 401

RECEIVED
 JUN 06 2016
 Secretary of State

Statement of Approval

The change specified in this statement has been authorized by the entity in the manner required by the BOC or in the manner required by the law governing the filing entity, as applicable.

Effectiveness of Filing (Select either A, B, or C.)

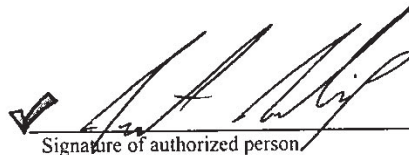
- A. ☒ This document becomes effective when the document is filed by the secretary of state.
- B. ☐ This document becomes effective at a later date, which is not more than ninety (90) days from the date of signing. The delayed effective date is: _____
- C. ☐ This document takes effect upon the occurrence of a future event or fact, other than the passage of time. The 90th day after the date of signing is: _____

The following event or fact will cause the document to take effect in the manner described below:

Execution

The undersigned affirms that the person designated as registered agent has consented to the appointment. The undersigned signs this document subject to the penalties imposed by law for the submission of a materially false or fraudulent instrument and certifies under penalty of perjury that the undersigned is authorized to execute the filing instrument.

Date: April 29, 2016


Signature of authorized person

Justin Bishop
Printed or typed name of authorized person (see instructions)

TEXAS FRANCHISE TAX PUBLIC INFORMATION REPORTComptroller of Public Accounts
05-102
(9-09/29)
Tcode 13196To be filed by Corporations and Limited Liability Companies (LLC) and Financial Institutions
This report **MUST** be signed and filed to satisfy franchise tax requirements

Taxpayer number

Report year

You have certain rights under Chapter 552 and 559, Government Code, to review, request, and correct information we have on file about you. Contact us at: (512) 463-4600, or (800) 252-1381, toll free nationwide.

3 2 0 4 6 0 2 2 1 5 1

2 0 1 5

Taxpayer name
DYNAMIS ENERGY LLCMailing address
2620 TECHNOLOGY FOREST BLVDSecretary of State file number or
Comptroller file numberCity
THE WOODLANDSState
TXZIP Code
77381Plus 4
3904**0801520512**☐ Blacken circle if there are currently no changes from previous year; if no information is displayed, complete the applicable information in Sections A, B and C.Principal office
2620 TECHNOLOGY FOREST BLVD, THE WOODLANDS, TX, 77381Principal place of business
2620 TECHNOLOGY FOREST BLVD, THE WOODLANDS, TX, 77381*Please sign below!*

Officer, director and member information is reported as of the date a Public Information Report is completed. The information is updated annually as part of the franchise tax report. There is no requirement or procedure for supplementing the information as officers, directors, or members change throughout the year.

**SECTION A** Name, title and mailing address of each officer, director or member.

3204602215115

Name DANIEL COOK	Title PRESIDENT	Director <input checked="" type="radio"/> YES	Term expiration m m d d y y [][][][][][]
Mailing address 66 KINGSCOTE WAY	City THE WOODLANDS	State TX	ZIP code 77382
Name ROBERT MICHAEL SCOTT II	Title CEO	Director <input checked="" type="radio"/> YES	Term expiration m m d d y y [][][][][][]
Mailing address 2702 COLE AVENUE 222	City DALLAS	State TX	ZIP code 75204
Name JUSTIN BISHOP	Title VP	Director <input checked="" type="radio"/> YES	Term expiration m m d d y y [][][][][][]
Mailing address 8387 SW 78TH LANE	City GAINSVILLE	State FL	ZIP code 32608

SECTION B Enter the information required for each corporation or LLC, if any, in which this entity owns an interest of ten percent (10%) or more.

Name of owned (subsidiary) corporation or limited liability company	State of formation	Texas SOS file number, if any	Percentage of Ownership
Name of owned (subsidiary) corporation or limited liability company	State of formation	Texas SOS file number, if any	Percentage of Ownership

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Name of owned (parent) corporation or limited liability company	State of formation	Texas SOS file number, if any	Percentage of Ownership
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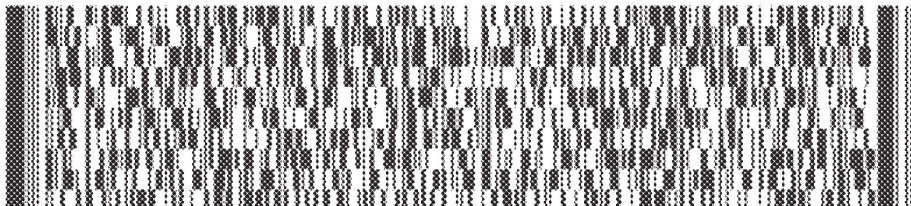
Registered agent and registered office currently on file. (See instructions if you need to make changes)

Agent: **DANIEL COOK**☐ Blacken circle if you need forms to change the registered agent or registered office information.Office: **2620 TECHNOLOGY FOREST BLVD**City **THE WOODLANDS**State **TX**ZIP Code **77381**

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Signature Rob Brown	Title Member	Date 09/18/2015	Area code and phone number (281) 681 - 2381
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Texas Comptroller Official Use Only

VE/DE	<input type="radio"/>	PIR IND	<input type="radio"/>
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DocuSign Envelope ID: 701D006E-60C4-413E-9926-00BD29A15FB5

Comptroller of Public Accounts
05-102
(9-09/29)
PC088

Tcode 13196

TEXAS FRANCHISE TAX PUBLIC INFORMATION REPORT

To be filed by Corporations and Limited Liability Companies (LLC) and Financial Institutions

This report **MUST** be signed and filed to satisfy franchise tax requirements

Taxpayer number

3 2 0 4 6 0 2 2 1 5 1

Report year

2 0 1 5

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Taxpayer name

DYNAMIS ENERGY LLC

Mailing address

2620 TECHNOLOGY FOREST BLVDSecretary of State file number or
Comptroller file number

City

THE WOODLANDS

State

TX

ZIP Code

77381

Plus 4

3904**0801520512**

☐ Blacken circle if there are currently no changes from previous year; if no information is displayed, complete the applicable information in Sections A, B and C.

Principal office

2620 TECHNOLOGY FOREST BLVD, THE WOODLANDS, TX, 77381

Principal place of business

2620 TECHNOLOGY FOREST BLVD, THE WOODLANDS, TX, 77381**Please sign below!**

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**SECTION A** Name, title and mailing address of each officer, director or member.

3204602215115

Name ROBERT CASE	Title	Director <input checked="" type="radio"/> YES	Term expiration m m d d y y
Mailing address 15 COURTLAND GREEN	City THE WOODLANDS	State TX	ZIP code 77382
Name	Title	Director <input type="radio"/> YES	Term expiration m m d d y y
Mailing address	City	State	ZIP code
Name	Title	Director <input type="radio"/> YES	Term expiration m m d d y y
Mailing address	City	State	ZIP code

SECTION B Enter the information required for each corporation or LLC, if any, in which this entity owns an interest of ten percent (10%) or more.

Name of owned (subsidiary) corporation or limited liability company	State of formation	Texas SOS file number, if any	Percentage of Ownership
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SECTION C Enter the information required for each corporation or LLC, if any, that owns an interest of ten percent (10%) or more in this entity or limited liability company.

Name of owned (parent) corporation or limited liability company	State of formation	Texas SOS file number, if any	Percentage of Ownership
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Registered agent and registered office currently on file. (See instructions if you need to make changes)

Agent: **DANIEL COOK**

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Office: **2620 TECHNOLOGY FOREST BLVD**

City

THE WOODLANDS

State

TX

ZIP Code

77381

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Sign here!

Rob Brown

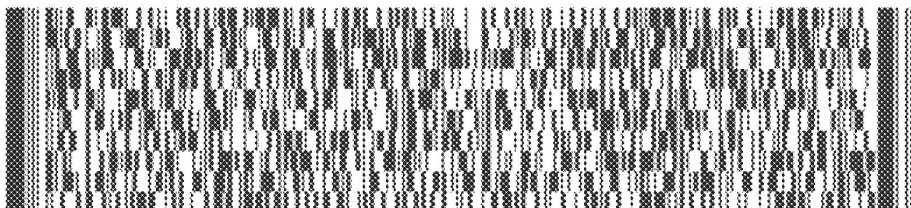
Title

Member

Date

09/18/2015

Area code and phone number

(281) 681 - 2381**Texas Comptroller Official Use Only**

VE/DE

☐

PIR IND

☐

TEXAS FRANCHISE TAX PUBLIC INFORMATION REPORT

Comptroller 05-102
of Public Accounts
(9-09/29)
PC0002

Tcode 13196

To be filed by Corporations and Limited Liability Companies (LLC) and Financial Institutions
This report MUST be signed and filed to satisfy franchise tax requirements

Taxpayer number

Report year

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3 2 0 4 6 0 2 2 1 5 1

2 0 1 4

Taxpayer name
DYNAMIS ENERGY LLCMailing address
2620 TECHNOLOGY FOREST BLVDSecretary of State file number or
Comptroller file numberCity
THE WOODLANDSState
TXZIP Code
77381Plus 4
3904**0801520512**

☐ Blacken circle if there are currently no changes from previous year; if no information is displayed, complete the applicable information in Sections A, B and C.

Principal office
2620 TECHNOLOGY FOREST BLVD, THE WOODLANDS, TX, 77381Principal place of business
2620 TECHNOLOGY FOREST BLVD, THE WOODLANDS, TX, 77381**Please sign below!**

Officer, director and member information is reported as of the date a Public Information Report is completed. The information is updated annually as part of the franchise tax report. There is no requirement or procedure for supplementing the information as officers, directors, or members change throughout the year.



3204602215114

SECTION A Name, title and mailing address of each officer, director or member.

Name DANIEL COOK	Title PRESIDENT	Director <input checked="" type="radio"/> YES	Term expiration m m d d y y [][][][][][]
Mailing address 66 KINGSCOTE WAY	City THE WOODLANDS	State TX	ZIP code 77382
Name ROBERT MICHAEL SCOTT II	Title CEO	Director <input checked="" type="radio"/> YES	Term expiration m m d d y y [][][][][][]
Mailing address 2702 COLE AVENUE 222	City DALLAS	State TX	ZIP code 75204
Name JUSTIN BISHOP	Title VP	Director <input checked="" type="radio"/> YES	Term expiration m m d d y y [][][][][][]
Mailing address 8387 SW 78TH LANE	City GAINSVILLE	State FL	ZIP code 32608

SECTION B Enter the information required for each corporation or LLC, if any, in which this entity owns an interest of ten percent (10%) or more.

Name of owned (subsidiary) corporation or limited liability company	State of formation	Texas SOS file number, if any	Percentage of Ownership
Name of owned (subsidiary) corporation or limited liability company	State of formation	Texas SOS file number, if any	Percentage of Ownership

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Name of owned (parent) corporation or limited liability company	State of formation	Texas SOS file number, if any	Percentage of Ownership
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Registered agent and registered office currently on file. (See instructions if you need to make changes)

Agent: **DANIEL COOK**

☐ Blacken circle if you need forms to change the registered agent or registered office information.

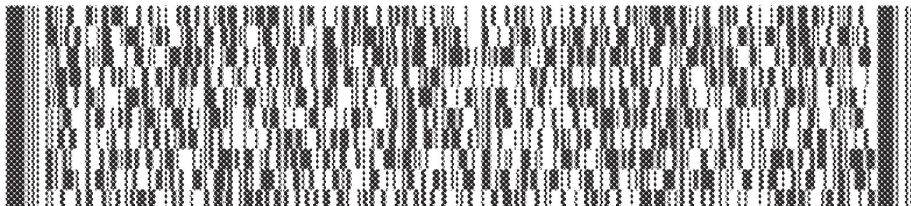
Office: **2620 TECHNOLOGY FOREST BLVD**City **THE WOODLANDS**State **TX**ZIP Code **77381**

The above information is required by Section 171.203 of the Tax Code for each corporation or limited liability company that files a Texas Franchise Tax Report. Use additional sheets for Sections A, B, and C, if necessary. The information will be available for public inspection.

I declare that the information in this document and any attachments is true and correct to the best of my knowledge and belief, as of the date below, and that a copy of this report has been mailed to each person named in this report who is an officer, director or member and who is not currently employed by this, or a related, corporation or limited liability company.

Signature DANIEL COOK	Title Member	Date 08/18/2014	Area code and phone number (281) 681 - 2381
---------------------------------	------------------------	---------------------------	---

Texas Comptroller Official Use Only



VE/DE	<input type="radio"/>	PIR IND	<input type="radio"/>
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Comptroller of Public Accounts
05-102
(9-09/29)
PC088

Tcode 13196

TEXAS FRANCHISE TAX PUBLIC INFORMATION REPORTTo be filed by Corporations and Limited Liability Companies (LLC) and Financial Institutions
This report **MUST** be signed and filed to satisfy franchise tax requirements

Taxpayer number

3 2 0 4 6 0 2 2 1 5 1

Report year

2 0 1 4

You have certain rights under Chapter 552 and 559, Government Code, to review, request, and correct information we have on file about you. Contact us at: (512) 463-4600, or (800) 252-1381, toll free nationwide.

Taxpayer name

DYNAMIS ENERGY LLC

Mailing address

2620 TECHNOLOGY FOREST BLVDSecretary of State file number or
Comptroller file number

City

THE WOODLANDS

State

TX

ZIP Code

77381

Plus 4

3904**0801520512**☐ Blacken circle if there are currently no changes from previous year; if no information is displayed, complete the applicable information in Sections A, B and C.

Principal office

2620 TECHNOLOGY FOREST BLVD, THE WOODLANDS, TX, 77381

Principal place of business

2620 TECHNOLOGY FOREST BLVD, THE WOODLANDS, TX, 77381*Please sign below!*

Officer, director and member information is reported as of the date a Public Information Report is completed. The information is updated annually as part of the franchise tax report. There is no requirement or procedure for supplementing the information as officers, directors, or members change throughout the year.



3204602215114

SECTION A Name, title and mailing address of each officer, director or member.

Name ROBERT CASE	Title	Director <input checked="" type="radio"/> YES	Term expiration m m d d y y
Mailing address 15 COURTLAND GREEN	City THE WOODLANDS	State TX	ZIP code 77382
Name	Title	Director <input type="radio"/> YES	Term expiration m m d d y y
Mailing address	City	State	ZIP code
Name	Title	Director <input type="radio"/> YES	Term expiration m m d d y y
Mailing address	City	State	ZIP code

SECTION B Enter the information required for each corporation or LLC, if any, in which this entity owns an interest of ten percent (10%) or more.

Name of owned (subsidiary) corporation or limited liability company	State of formation	Texas SOS file number, if any	Percentage of Ownership
Name of owned (subsidiary) corporation or limited liability company	State of formation	Texas SOS file number, if any	Percentage of Ownership

SECTION C Enter the information required for each corporation or LLC, if any, that owns an interest of ten percent (10%) or more in this entity or limited liability company.

Name of owned (parent) corporation or limited liability company	State of formation	Texas SOS file number, if any	Percentage of Ownership
---	--------------------	-------------------------------	-------------------------

Registered agent and registered office currently on file. (See instructions if you need to make changes)

Agent: **DANIEL COOK**☐ Blacken circle if you need forms to change the registered agent or registered office information.Office: **2620 TECHNOLOGY FOREST BLVD**

City

THE WOODLANDS

State

TX

ZIP Code

77381

The above information is required by Section 171.203 of the Tax Code for each corporation or limited liability company that files a Texas Franchise Tax Report. Use additional sheets for Sections A, B, and C, if necessary. The information will be available for public inspection.

I declare that the information in this document and any attachments is true and correct to the best of my knowledge and belief, as of the date below, and that a copy of this report has been mailed to each person named in this report who is an officer, director or member and who is not currently employed by this, or a related, corporation or limited liability company.

Sign here!

DANIEL COOK

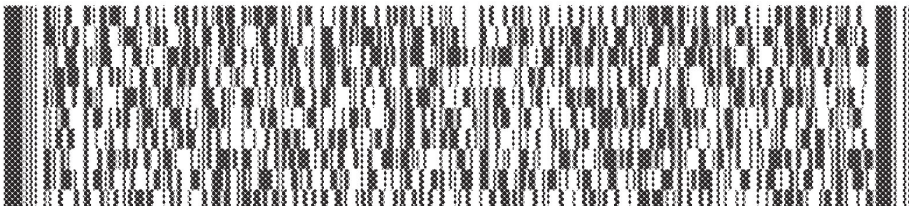
Title

Member

Date

08/18/2014

Area code and phone number

(281) 681 - 2381**Texas Comptroller Official Use Only**

VE/DE	<input type="radio"/>	PIR IND	<input type="radio"/>
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Texas Franchise Tax Public Information ReportComptroller of Public Accounts
05-102
(Rev. 9-11/30)To be filed by Corporations, Limited Liability Companies (LLC) and Financial Institutions
This report MUST be signed and filed to satisfy franchise tax requirements

Taxcode 13196 Franchise

Taxpayer number

Report year

You have certain rights under Chapter 552 and 559, Government Code, to review, request, and correct information we have on file about you. Contact us at (800) 252-1381 or (512) 463-4600.

3 2 0 4 6 0 2 2 1 5 1

2 0 1 3

Taxpayer name
DYNAMIS ENERGY, LLCMailing address
2620 TECHNOLOGY FOREST BLVDSecretary of State (SOS) file number or
Comptroller file numberCity
THE WOODLANDSState
TXZIP Code
77381

Plus 4

0801520512

Blacken circle if there are currently no changes from previous year; if no information is displayed, complete the applicable information in Sections A, B and C.

Principal office

Principal place of business

Please sign below!

Officer, director and manager information is reported as of the date a Public Information Report is completed. The information is updated annually as part of the franchise tax report. There is no requirement or procedure for supplementing the information as officers, directors, or managers change throughout the year.

**SECTION A** Name, title and mailing address of each officer, director or manager.

3204602215113

Name MICHAEL SCOTT	Title CHIEF EXEC	Director <input type="radio"/> YES	Term expiration m m d d y y
Mailing address 4300 N. CENTRAL EXPRESSWAY #325	City DALLAS	State TX	ZIP Code 75206
Name JUSTIN BISHOP	Title VICE PRESI	Director <input type="radio"/> YES	Term expiration m m d d y y
Mailing address 8387 SW 78TH LANE	City GAINESVILLE	State FL	ZIP Code 32608
Name DANIEL COOK	Title MEMBER	Director <input type="radio"/> YES	Term expiration m m d d y y
Mailing address 2620 TECHNOLOGY FOREST BLVD	City THE WOODLANDS	State TX	ZIP Code 77381

SECTION B Enter the information required for each corporation or LLC, if any, in which this entity owns an interest of 10 percent or more.

Name of owned (subsidiary) corporation or limited liability company	State of formation	Texas SOS file number, if any	Percentage of ownership
Name of owned (subsidiary) corporation or limited liability company	State of formation	Texas SOS file number, if any	Percentage of ownership

SECTION C Enter the information required for each corporation or LLC, if any, that owns an interest of 10 percent or more in this entity or limited liability company.

Name of owned (parent) corporation or limited liability company	State of formation	Texas SOS file number, if any	Percentage of ownership
---	--------------------	-------------------------------	-------------------------

Registered agent and registered office currently on file. (see instructions if you need to make changes)

Agent: **DANIEL COOK**☐ Blacken circle if you need forms to change the registered agent or registered office information.Office: **2620 NORTH CRESCENT RIDGE DRIVE** City: **THE WOODLANDS** State: **TX** ZIP Code: **77381**

The above information is required by Section 171.203 of the Tax Code for each corporation or limited liability company that files a Texas Franchise Tax Report. Use additional sheets for Sections A, B, and C, if necessary. The information will be available for public inspection.

I declare that the information in this document and any attachments is true and correct to the best of my knowledge and belief, as of the date below, and that a copy of this report has been mailed to each person named in this report who is an officer, director or manager and who is not currently employed by this, or a related, corporation or limited liability company.

Sign here: **Rickki J Shannon** Title: **Electronic** Date: **05-14-2013** Area code and phone number: **(832) 389 - 5003****Texas Comptroller Official Use Only**

VE/DE	<input type="radio"/>	PIR IND	<input type="radio"/>
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Filing Number: 801520512

Comptroller of Public Accounts
FORM 05-102 (Rev. 9-11/30)

Tcode 13196

Texas Franchise Tax Public Information Report

To be filed by Corporations, Limited Liability Companies (LLC) and Financial Institutions

This report MUST be signed and filed to satisfy franchise tax requirements

Taxpayer number

3 | 2 | 0 | 4 | 6 | 0 | 2 | 2 | 1 | 5 | 1

Report year

2 | 0 | 1 | 2

You have certain rights under Chapter 552 and 559, Government Code, to review, request, and correct information we have on file about you. Contact us at (800) 252-1381 or (512) 463-4600.Taxpayer name
DYNAMIS ENERGY LLC
Mailing address
2620 TECHNOLOGY FOREST BLVD
City
THE WOODLANDSState
TXZIP Code
77381Plus 4
3904Secretary of State (SOS) file number
or Comptroller file number
0801520512☐ Blacken circle if there are currently no changes from previous year; if no information is displayed, complete the applicable information in Sections A, B and C.Principal office
4300 N. CENTRAL EXPRESSWAY #325, DALLAS, TEXAS, 75206
Principal place of business
4300 N. CENTRAL EXPRESSWAY #325, DALLAS, TEXAS, 75206***Please sign below!***

Officer, director and member information is reported as of the date a Public Information Report is completed. The information is updated annually as part of the franchise tax report. There is no requirement or procedure for supplementing the information as officers, directors, or members change throughout the year.



3204602215112

SECTION A Name, title and mailing address of each officer, director or member.

Name

Title

Director

Term expiration m m d d y y

DANIEL COOK**MEMBER**☐ YES

Term expiration

Mailing address
2620 TECHNOLOGY FOREST BLVD
NameCity
THE WOODLANDSState
TXZIP Code
77381**MICHAEL SCOTT****CEO**

Director

Term expiration m m d d y y

☐ YES

Term expiration

Mailing address
4300 N. CENTRAL EXPRESSWAY #325
NameCity
DALLASState
TXZIP Code
75206**JUSTIN BISHOP****VP**

Director

Term expiration m m d d y y

☐ YES

Term expiration

Mailing address
8387 SW 78TH LANECity
GAINESVILLEState
FLZIP Code
32608**SECTION B** Enter the information required for each corporation or LLC, if any, in which this entity owns an interest of 10 percent or more.

Name of owned (subsidiary) corporation or limited liability company

State of formation

Texas SOS file number, if any

Percentage of ownership

Name of owned (subsidiary) corporation or limited liability company

State of formation

Texas SOS file number, if any

Percentage of ownership

SECTION C Enter the information required for each corporation or LLC, if any, that owns an interest of 10 percent or more in this entity or limited liability company.

Name of owned (parent) corporation or limited liability company

State of formation

Texas SOS file number, if any

Percentage of ownership

Registered agent and registered office currently on file. (see instructions if you need to make changes)

Agent: **DANIEL COOK**☐ Blacken circle if you need forms to change the registered agent or registered office information.Office: **2620 TECHNOLOGY FOREST BLVD**City
THE WOODLANDSState
TXZIP Code
77381

The above information is required by Section 171.203 of the Tax Code for each corporation or limited liability company that files a Texas Franchise Tax Report. Use additional sheets for Sections A, B, and C, if necessary. The information will be available for public inspection.

I declare that the information in this document and any attachments is true and correct to the best of my knowledge and belief, as of the date below, and that a copy of this report has been mailed to each person named in this report who is an officer, director or member and who is not currently employed by this, or a related, corporation or limited liability company.

sign
hereTitle
CAODate
08/03/2012Area code and phone number
(281) 681 - 2381

Texas Comptroller of Public Accounts

VE/DE

☐

PIR IND

☐



Office of the Secretary of State
Corporations Section
P.O. Box 13697
Austin, Texas 78711-3697
(Form 503)

Filed in the Office of the
Secretary of State of Texas
Filing #: 801520512 6/4/2012
Document #: 424494790002
Image Generated Electronically
for Web Filing

**ASSUMED NAME CERTIFICATE
FOR FILING WITH THE SECRETARY OF STATE**

1. The assumed name under which the business or professional service is or is to be conducted or rendered is:

United Energy Services

2. The name of the entity as stated in its certificate of formation, application for registration, or comparable document is:

Dynamis Energy, LLC

3. The state, country, or other jurisdiction under the laws of which it was incorporated, organized or associated is **TEXAS** and the address of its registered or similar office in that jurisdiction is:
2620 North Crescent Ridge Drive, The Woodlands, TX, USA 77381

4. The period, not to exceed 10 years, during which the assumed name will be used is :
06/04/2022

5. The entity is a : **Domestic Limited Liability Company (LLC)**

6. The entity's principal office address in Texas is:

4300 North Central Expressway #325, Dallas, TX, USA 75206

7. The entity is not organized under the laws of Texas and is not required by law to maintain a registered agent and registered office in Texas. Its office address outside the state is:

8. The county or counties where business or professional services are being or are to be conducted or rendered under such assumed name are:

ALL COUNTIES

9. The undersigned, if acting in the capacity of an attorney-in-fact of the entity, certifies that the entity has duly authorized the attorney-in-fact in writing to execute this document. The undersigned signs this document subject to the penalties imposed by law for the submission of a materially false or fraudulent instrument.

DocuSign Envelope ID: 701D006E-60C4-413E-9926-00BD29A15FB5

Dynamis Energy, LLC

Name of the entity

By: **Robert B. Brown III**

Signature of officer, general partner, manager,
representative or attorney-in-fact of the entity

FILING OFFICE COPY

Form 622**(Revised 12/08)**

Return in duplicate to:

Secretary of State

P.O. Box 13697

Austin, TX 78711-3697

512 463-5555

FAX: 512 463-5709

Filing Fee: see instructions

**Certificate of Merger
Combination Merger
Business Organizations Code**

This space reserved for office use.

FILED
In the Office of the
Secretary of State of Texas**APR 26 2012****Corporations Section****Parties to the Merger**

Pursuant to chapter 10 of the Texas Business Organizations Code, and the title applicable to each domestic filing entity identified below, the undersigned parties submit this certificate of merger.

The name, organizational form, state of incorporation or organization, and file number, if any, issued by the secretary of state for each organization that is a party to the merger are as follows:

Party 1United Energy Services, Inc.

Name of Organization

The organization is a for-profit corporation

Specify organizational form (e.g., for-profit corporation)

It is organized under the laws of

Florida USA

State Country

The file number, if any, is

Texas Secretary of State file number

Its principal place of business is

Address

8387 SW 78th Lane, Gainesville, Florida

City

State

☐ The organization will survive the merger.☒ The organization will not survive the merger.☒ The plan of merger amends the name of the organization. The new name is set forth below.Dynamis Energy, LLC

Name as Amended

Party 2Dynamis Energy, LLC

Name of Organization

The organization is a limited liability company

Specify organizational form (e.g., for-profit corporation)

It is organized under the laws of

Texas USA

State Country

The file number, if any, is 801520512

Texas Secretary of State file number

Its principal place of business is 4300 North Central Express Way

Address

City

Dallas

State

☒ The organization will survive the merger.☐ The organization will not survive the merger.☐ The plan of merger amends the name of the organization. The new name is set forth below.

Name as Amended

Party 3N/A

Name of Organization

The organization is a

Specify organizational form (e.g., for-profit corporation)

It is organized under the laws of

The file number, if any, is _____

State _____ County _____ Texas Secretary of State file number _____

Its principal place of business is _____

Address _____ City _____ State _____

☐ The organization will survive the merger. ☐ The organization will not survive the merger.

☐ The plan of merger amends the name of the organization. The new name is set forth below.

Name as Amended

Plan of Merger

☐ The plan of merger is attached.

If the plan of merger is not attached, the following statements must be completed.

Alternative Statements

In lieu of providing the plan of merger, each domestic filing entity certifies that:

1. A signed plan of merger is on file at the principal place of business of each surviving, acquiring, or new domestic entity or non-code organization that is named in this form as a party to the merger or an organization created by the merger.
2. On written request, a copy of the plan of merger will be furnished without cost by each surviving, acquiring, or new domestic entity or non-code organization to any owner or member of any domestic entity that is a party to or created by the plan of merger and, if the certificate of merger identifies multiple surviving domestic entities or non-code organizations, to any creditor or obligee of the parties to the merger at the time of the merger if a liability or obligation is then outstanding.

Complete item 3B if the merger effected changes to the certificate of formation of a surviving filing entity.

- 3A. No amendments to the certificate of formation of any surviving filing entity that is a party to the merger are effected by the merger.
- 3B. ☐ The plan of merger effected changes or amendments to the certificate of formation of:

Name of filing entity effecting amendments

The changes or amendments to the filing entity's certificate of formation, other than the name change noted previously, are stated below.

Amendment Text Area

4. Organizations Created by Merger

The name, jurisdiction of organization, principal place of business address, and entity description of each entity or other organization to be created pursuant to the plan of merger are set forth below. The certificate of formation of each new domestic filing entity to be created is being filed with this certificate of merger.

Name of New Organization 1	Jurisdiction	Entity Type (See instructions)
----------------------------	--------------	--------------------------------

Principal Place of Business Address	City	State	Zip Code
-------------------------------------	------	-------	----------

Name of New Organization 2	Jurisdiction	Entity Type (See instructions)
----------------------------	--------------	--------------------------------

Principal Place of Business Address	City	State	Zip Code
-------------------------------------	------	-------	----------

Name of New Organization 3	Jurisdiction	Entity Type (See instructions)
----------------------------	--------------	--------------------------------

Principal Place of Business Address	City	State	Zip
-------------------------------------	------	-------	-----

Approval of the Plan of Merger

The plan of merger has been approved as required by the laws of the jurisdiction of formation of each organization that is a party to the merger and by the governing documents of those organizations.

☐ The approval of the owners or members of _____
Name of domestic entity
was not required by the provisions of the BOC.

Effectiveness of Filing (Select either A, B, or C.)

A. ☒ This document becomes effective when the document is accepted and filed by the secretary of state.

B. ☐ This document becomes effective at a later date, which is not more than ninety (90) days from the date of signing. The delayed effective date is: _____

C. ☐ This document takes effect on the occurrence of the future event or fact, other than the passage of time. The 90th day after the date of signing is: _____

The following event or fact will cause the document to take effect in the manner described below:

Tax Certificate

☐ Attached hereto is a certificate from the comptroller of public accounts that all taxes under title 2, Tax Code, have been paid by the non-surviving filing entity.

☒ In lieu of providing the tax certificate, one or more of the surviving, acquiring or newly created organizations will be liable for the payment of the required franchise taxes.

DocuSign Envelope ID: 701D006E-60C4-413E-9926-00BD29A15FB5
APR 20 2012 2:40 PM DUNCAN & DUNCAN LLP

No. 0147 P. 5

Execution

The undersigned signs this document subject to the penalties imposed by law for the submission of a materially false or fraudulent instrument. The undersigned certifies that the statements contained herein are true and correct, and that the person signing is authorized under the provisions of the Business Organizations Code, or other law applicable to and governing the merging entity, to execute the filing instrument.

Date: 4-19-12United Energy Services, Inc.

Merging Entity Name

Signature of authorized person (see instructions)

Justin Bishop
Printed or typed name of authorized personDynamis Energy, LLC

Merging Entity Name

Signature of authorized person (see instructions)

W. DANIEL COOK
Printed or typed name of authorized person

Merging Entity Name

Signature of authorized person (see instructions)

Printed or typed name of authorized person

**CERTIFICATE OF FORMATION
LIMITED LIABILITY COMPANY
OF
DYNAMIS ENERGY, LLC**

FILED
In the Office of the
Secretary of State of Texas
DEC 14 2011
Corporations Section

The undersigned natural person, being of the age of eighteen (18) years or more, acting as the organizer of a limited liability company, does hereby adopt the following Certificate of Formation:

1. The name of the limited liability company is Dynamis Energy, LLC (the "Limited Liability Company").

2. The address of the registered office and name of the registered agent for service of process is: Daniel Cook, 2620 North Crescent Ridge Drive, The Woodlands, Texas 77381.

3. The Limited Liability Company will have managers. The name and address of each initial manager is set forth below:

Daniel Cook
2620 North Crescent Ridge Drive
The Woodlands, Texas 77381

4. The purpose for which the Limited Liability Company is formed is for the transaction of any and all lawful purposes for which a limited liability company may be organized under the Texas Business Organizations Code.

5. The name and address of the organizer of the Limited Liability Company is:

Casey W. Doherty, Sr.
Doherty & Doherty LLP
1717 St. James Place, Suite 520
Houston, Texas 77056

6. This document is to become effective when filed by the secretary of state.

The undersigned signs this document subject to the penalties imposed by law for the submission of a materially false or fraudulent instrument.

Date: December 14, 2011.

ORGANIZER:



Casey W. Doherty, Sr.